

The Evolution of the Rest Treatment

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THE EVOLUTION OF THE REST TREATMENT

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I have been asked to come here to-night to speak to you on some subject connected with nervous disease. I had hoped to have had ready a fitting paper for so notable an occasion, but have been prevented by public engagements and private business so as to make it quite impossible. I have, therefore, been driven to ask whether it would be agreeable if I should speak in regard to the mode in which the treatment of disease by rest was evolved. This being favorably received, I am here this evening to say a few words on that subject.

You all know full well that the art of cure rests upon a number of sciences, and that what we do in medicine, we cannot always explain, and that our methods are far from having the accuracy involved in the term scientific. Very often, however, it is found that what comes to us through some accident or popular use and proves of value, is defensible in the end by scientific explanatory research. This was the case as regards the treatment I shall briefly consider for you to-night.

The first indication I ever had of the great value of mere rest in disease, was during the Civil War, when there fell into the hands of Doctors Morehouse, Keen and myself, a great many cases of what we called acute exhaustion. These were men, who, being tired by much marching, gave out suddenly at the end of some unusual exertion, and remained for weeks, perhaps months, in a pitiable state of what we should call today, Neurasthenia. In these war cases, it came on with strange abruptness. It was more extreme and also more certainly curable than are most of the graver male cases which now we are called on to treat.

I have seen nothing exactly like it in civil experience, but the combination of malaria, excessive exertion, and exposure provided cases such as no one sees today. Complete rest and plentiful diet usually brought these men up again and in many instances enabled them to return to the front.

In 1872 I had charge of a man who had locomotor ataxia with extreme pain in the extremities, and while making some

unusual exertion, he broke his right thigh. This confined him to his bed for three months, and the day he got up, he broke his left thigh. This involved another three months of rest. At the end of that time he confessed with satisfaction that his ataxia was better, and that he was, as he remained thereafter, free from pain. I learned from this, and two others cases, that in ataxia the bones are brittle, and I learned also that rest in bed is valuable in a proportion of such cases. You may perceive that my attention was thus twice drawn towards the fact that mere rest had certain therapeutic values.

In 1874 Mrs. G., of B——, Maine, came to see me in the month of January. I have described her case elsewhere, so that it is needless to go into detail here, except to say that she was a lady of ample means, with no special troubles or annoyances, but completely exhausted by having had children in rapid succession and from having undertaken to do charitable and other work to an extent far beyond her strength. When first I saw this tall woman, large, gaunt, weighing under a hundred pounds, her complexion pale and acneous, and heard her story, I was for a time in a state of such therapeutic despair as usually fell upon physicians of that day when called upon to treat such cases. She had been to Spas, to physicians of the utmost eminence, passed through the hands of gynecologists, worn spinal supporters, and taken every tonic known to the books. When I saw her she was unable to walk upstairs. Her exercise was limited to moving feebly up and down her room, a dozen times a day. She slept little and, being very intelligent, felt deeply her inability to read or write. Any such use of the eyes caused headache and nausea. Conversation tired her, and she had by degrees accepted a life of isolation. She was able partially to digest and retain her meals if she lay down in a noiseless and darkened room. Any disturbance or the least excitement, in short, any effort, caused nausea and immediate rejection of her meal. With care she could retain enough food to preserve her life and hardly to do more. Anemia, which we had then no accurate means of measuring, had been met by half a dozen forms of iron, all of which were said to produce headache, and generally to disagree with her. Naturally enough, her case

had been pronounced to be hysteria, but calling names may relieve a doctor and comfort him in failure, but does not always assist the patient, and to my mind there was more of a general condition of nervous excitability due to the extreme of weakness than I should have been satisfied to label with the apologetic label hysteria.

I sat beside this woman day after day, hearing her pitiful story, and distressed that a woman, young, once handsome, and with every means of enjoyment in life should be condemned to what she had been told was a state of hopeless invalidism. After my third or fourth visit, with a deep sense that everything had been done for her that able men could with reason suggest, and many things which reason never could have suggested, she said to me that I appeared to have nothing to offer which had not been tried over and over again. I asked her for another day before she gave up the hope which had brought her to me. The night brought counsel. The following morning I said to her, if you are at rest you appear to digest your meals better. "Yes," she said, "I have been told that on that account I ought to lie in bed. It has been tried, but when I remain in bed for a few days, I lose all appetite, have intense constipation, and get up feeling weaker than when I went to bed. Please do not ask me to go to bed." Nevertheless, I did, and a week in bed justified her statements. She threw up her meals undigested, and was manifestly worse for my experiment. Sometimes the emesis was mere regurgitation, sometimes there was nausea and violent straining, with consequent extreme exhaustion. She declared that unless she had the small exercise of walking up and down her room, she was infallibly worse. I was here between two difficulties. That she needed rest I saw, that she required some form of exercise I also saw. How could I unite the two?

As I sat beside her, with a keen sense of defeat, it suddenly occurred to me that some time before, I had seen a man, known as a layer on of hands, use very rough rubbing for a gentleman who was in a state of general paresis. Mr. S. had asked me if I objected to this man rubbing him. I said no, and that I should like to see him do so, as he had

relieved, to my knowledge, cases of rheumatic stiffness. I was present at two sittings and saw this man rub my patient. He kept him sitting in a chair at the time and was very rough and violent like the quacks now known as osteopaths. I told him he had injured my patient by his extreme roughness, and that if he rubbed him at all he must be more gentle. He took the hint and as a result there was, every time a notable but temporary gain. Struck with this, I tried to have rubbing used on spinal cases, but those who tried to do the work were inefficient, and I made no constant use of it. It remained, however, on my mind, and recurred to me as I sat beside this wreck of a useful and once vigorous woman. The thought was fertile. I asked myself why rubbing might not prove competent to do for the muscles and tardy circulation what voluntary exercise does. I said to myself, this may be exercise without exertion, and wondered why I had not long before had this pregnant view of the matter.

Suffice it to say that I brought a young woman to Mrs. G.'s bedside and told her how I thought she ought to be rubbed. The girl was clever, and developed talent in that direction, and afterwards became the first of that great number of people who have since made a livelihood by massage. I watched the rubbing two or three times, giving instructions, in fact developing out of the clumsy massage I had seen, the manual of a therapeutic means, at that time entirely new to me. A few days later I fell upon the idea of giving electric passive exercise and cautiously added this second agency. Meanwhile, as she had always done best when secluded, I insisted on entire rest and shut out friends, relatives, books and letters. I had some faith that I should succeed. In ten days I was sure. The woman had found a new tonic, hope, and blossomed like a rose. Her symptoms passed away one by one. I was soon able to add to her diet, to feed her between meals, to give her malt daily, and, after a time, to conceal in it full doses of pyro-phosphates of iron. First, then, I had found two means which enabled me to use rest in bed without causing the injurious effects of unassisted rest; secondly, I had discovered that massage was a tonic of extraordinary value; thirdly, I had learned that with this combination of seclusion, massage and

electricity, I could overfeed the patient until I had brought her into a state of entire health. I learned later the care which had to be exercised in getting these patients out of bed. But this does not concern us now. In two months she gained forty pounds and was a cheerful, blooming woman, fit to do as she pleased. She has remained, save for time's ravage, what I made her.

It may strike you as interesting that for a while I was not fully aware of the enormous value of a therapeutic discovery which employed no new agents, but owed its usefulness to a combination of means more or less well known.

Simple rest as a treatment had been suggested, but not in this class of cases. Massage has a long history. Used, I think, as a luxury by the Orientals for ages, it was employed by Ling in 1813. It never attained perfection in the hands of the Swedes, nor do they to-day understand the proper use of this agent. It was over and over recognized in Germany, but never generally accepted. In France, at a later period, Dreyfus, in 1841, wrote upon it and advised its use, as did Recamier and Lainé in 1868. Two at least of these authors thought it useful as a general agent, but no one seems to have accepted their views, nor was its value as a tonic spoken of in the books on therapeutics or recommended in any text-book as a powerful toning agent. It was used here in the Rest Treatment, and this, I think, gave it vogue and caused the familiar use of this invaluable therapeutic measure.

A word before I close. My first case left me in May, 1874, and shortly afterwards I began to employ the same method in other cases, being careful to choose only those which seemed best suited to it. My first mention in print of the treatment was in 1875, in the Sequin Lectures, Vol. I., No. 4, "Rest in the Treatment of Disease." In that paper I first described Mrs. G.'s case. My second paper was in 1877, an address before the Medico-Chirurgical Faculty of Maryland, and the same year I printed my book on "Rest Treatment." The one mistake in the book was the title. I was, however, so impressed at the time by the extraordinary gain in flesh and blood under this treatment that I made it too prominent in the title of the book. Let me say that for a long time the new treat-

ment was received with the utmost incredulity. When I spoke in my papers of the people who had gained half a pound a day or more, my results were questioned and ridiculed in this city as approaching charlatanism. At a later date in England some physicians were equally wanting in foresight and courtesy. It seems incredible that any man who was a member of the British Medical Association could have said that he would rather see his patients not get well than have them cured by such a method as that. It was several years before it was taken up by Professor Goodell, and it was a longer time in making its way in Europe when by mere accident it came to be first used by Professor William Playfair.

I suffered keenly at the time from this unfair criticism, as any sensitive man must have done, for some who were eminent in the profession said of it and of me things which were most inconsiderate. Over and over in consultation it was rejected with ill-concealed scorn. I made no reply to my critics. I knew that time would justify me; I have added a long since accepted means of helping those whom before my day few helped. This is a sufficient reward for silence, patience and self-faith. I fancy that there are in this room many who have profited for themselves and their patients by the thought which evolved the Rest Treatment as I sat by the bedside of my first rest case in 1874. Playfair said of it at the British Association that he had nothing to add to it and nothing to omit, and to this day no one has differed as to his verdict.

How fully the use of massage has been justified by the later scientific studies of Lauder Brunton, myself, and others you all know. It is one of the most scientific of remedial methods.



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